



On the Radar

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On the Radar

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The problem with making Safety-II work in healthcare
Verhagen MJ, de Vos MS, Sujan M, Hamming JF
BMJ Quality & Safety. 2022 [epub].

DOI	https://dx.doi.org/10.1136/bmjqs-2021-014396
Notes	<p>The problem with...? series in <i>BMJ Quality & Safety</i> covers controversial topics related to efforts to improve healthcare quality, including widely recommended, but deceptively difficult strategies for improvement and pervasive problems that seem to resist solution.</p> <p>Traditionally patient safety management has been failure orientated and measured the frequency of reported adverse events or incidents (Safety-I). An alternative approach is to study variability in everyday work and seek insights into how people and systems deal with complexity and uncertainty while continuing to deliver positive patient outcomes (Safety-II). Despite its appeal and potential, significant challenges remain for the interpretation and application of the Safety-II perspective in healthcare.</p>

	<p>This paper outlines these challenges and opportunities for future research, while highlighting the importance of designing studies that robustly evaluate the effectiveness of Safety-II interventions.</p> <p>It is suggested that different healthcare processes and contexts may demand different safety strategies. Safety-I and Safety-II represent two distinct, yet complementary learning opportunities which may coexist alongside each other depending on the situational requirements. Using this approach shifts the focus from what went wrong, and which barriers might have failed towards the trade-offs and adaptations people need to make and how these might be supported. For example, morbidity and mortality conferences can be adapted to also discuss cases with expected outcomes rather than only negative cases, thereby enabling learning from how success is created in these cases despite perhaps similar risks and challenges existing.</p>
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URL	https://journals.lww.com/journalpatientsafety/toc/2022/04000
Notes	<p>A new issue of the <i>Journal of Patient Safety</i> has been published. Articles in this issue of the <i>Journal of Patient Safety</i> include:</p> <ul style="list-style-type: none"> • Comparisons of Fall Prevention Activities Using Electronic Nursing Records: A Case-Control Study (Hyesil Jung, Hyeoun-Ae Park, Ho-Y Lee) • Multifactorial Interventions to Reduce Duration and Variability in Delays to Identification of Serious Injury After Falls in Hospital Inpatients (Jawaad Saleem, Dhruv Sarma, Hannah Wright, Kelly Fisher, Benjamin Pinnington, Valandis Kostas, Kia-Chong Chua, Peter Sommerville) • Development of 2 Short Patient-Report Questionnaires of Patient Safety in Primary Care (Luke T A Mounce, Nde-Eshimuni Salema, Jaheeda Gangannagaripalli, I Ricci-Cabello, A J Avery, U T Kadam, J M Valderas) • Adverse Events Associated With Electromyogram Endotracheal Tubes in Thyroid and Parathyroid Surgery (Matthew M Pier, Luke J Pasick, Daniel A Benito, Juan Nogues, Punam Thakkar, Arjun S Joshi, Joseph F Goodman) • Reducing Falls in Dementia Inpatients Using Vision-Based Technology (Kay Wright, Swaran Singh) • Validation of the German Version of the Second Victim Experience and Support Tool—Revised (Reinhard Strametz, Bianka Siebold, Peter Heistermann, Susanne Haller, Stefan Bushuven) • Psychometric Properties of the Safety Climate Survey in Austrian Acute Care: Factor Structure, Reliability, and Usability (Manela Glarcher, Karin Kaiser, Nadja Nestler, Patrick Kutschar) • A Worldwide Bibliometric Analysis of Published Literature on Medication Errors (Noemi Giannetta, Sara Dionisi, Monica Tonello, Emanuele Di Simone, Marco Di Muzio) • Catching Fire: Are Operating Room Fires a Concern in Orthopedics? (Achraf Jardaly, A Arguello, B A Ponce, K Leitch, G McGwin, S R Gilbert, on behalf of the Collaborative Orthopaedic Educational Research Group) • Safety of Elderly Fallers: Identifying Associated Risk Factors for 30-Day Unplanned Readmissions Using a Clinical Data Warehouse (Asmae El Abd, Camille Schwab, Alice Clementz, Christine Fernandez, Patrick Hindlet) • Impact on Patient Safety Culture by the Intervention of Multidisciplinary Medical Teams (Shao-Jen Weng, Chieh-Liang Wu, Donald F Gotcher, Shih-Chia Liu, Kuei-Fen Yang, Seung-Hwan Kim)

- Perceptions of Stakeholders Toward “**Hospital at Home**” Program in Singapore: A Descriptive Qualitative Study (Crystal Min Siu Chua, Stephanie Qianwen Ko, Yi Feng Lai, Yee Wei Lim, Shefaly Shorey)
- Strength of Improvement Recommendations From **Injurious Fall Investigations**: A Retrospective Multi-Incident Analysis (Olivia Paulik, Jamie Hallen, Samuel Lapkin, Heidi Green, Ritin Fernandez)
- **Hemodialysis Bleeding Events and Deaths**: An 18-Year Retrospective Analysis of Patient Safety and Root Cause Analysis Reports in the Veterans Health Administration (Edward Walton, Maureen Charles, Wendy Morrish, Christina Soncrant, Peter Mills, William Gunnar)
- Evaluation of **In-Hospital Venous Thromboembolism** Prevention and Management System Using Hospital-Level Metrics: A Nationwide Cross-Sectional Survey in China (Kaiyuan Zhen, Fen Dong, Fang Fang, Qian Gao, Zhu Zhang, Lei Xia, Wei Wang, Peiran Yang, Cunbo Jia, Peng Liu, Zhenguo Zhai, Chen Wang, On behalf of Chinese Prevention Strategy for Venous Thromboembolism (CHIPS-VTE) study group)
- The Voice of the Patient: Patient Roles in **Antibiotic Management at the Hospital-to-Home Transition** (Sima L Sharara, Alicia I Arbaje, Sara E Cosgrove, Ayse P Gurses, K Dzintars, N Ladikos, S S Qasba, S C Keller)
- Impact of a Review of a **Smart Infusion Pump Library in Hematology/Oncology**: Tailoring Content to Meet Specialty Needs (Jeanie Misko, Matthew Rawlins, Breigh Ridley)
- Omissions and Deviations From **Safe Drug Administration Guidelines** in 2 Medical Wards and Risk Factors: Findings From an Observational Study (Georgios Savva, Anastasios Merkouris, A Charalambous, E Papastavrou)
- A 6-Year Thematic Review of Reported Incidents Associated With **Cardiopulmonary Resuscitation Calls** in a United Kingdom Hospital (Martin Beed, Sumera Hussain, Nick Woodier, Cathie Fletcher, P G Brindley)
- Alcohol-Based Hand Rub Consumption and World Health Organization **Hand Hygiene** Self-Assessment Framework: A Comparison Between the 2 Surveillances in a 4-Year Region-Wide Experience (Jacopo Garlasco, Costanza Vicentini, I N Emelurumonye, G D’Alessandro, F Quattrocchio, C M Zotti)
- The Impact of Smart Pump Interoperability on Errors in **Intravenous Infusion Administrations**: A Multihospital Before and After Study (Jilian Skog, Sally Rafie, Kumiko O Schnock, Catherine Yoon, Stuart Lipsitz, P Lew)
- Challenges and Barriers to **Adverse Event Reporting in Clinical Trials**: A Children’s Oncology Group Report (Tamara P Miller, Melissa Z Marx, Christopher Henchen, Nicholas P DeGroote, Sally Jones, Jenny Weiland, Beth Fisher, Adam J Esbenshade, Richard Aplenc, C C Dvorak, B T Fisher)
- **Hospital Cultural Competency and Attributes of Patient Safety Culture**: A Study of U.S. Hospitals (Soumya Upadhyay, Amber L Stephenson, Robert Weech-Maldonado, Christopher Cochran)
- Cross-cultural Adaptation of the **Safety Attitudes Questionnaire** Short Form in Spanish and Italian Operating Rooms: Psychometric Properties (Vicente Bernalte-Martí)
- Ultrasound-Guided Peripheral Intravenous Catheter Insertion Training Reduces Use of **Midline Catheters** in Hospitalized Patients With Difficult Intravenous Access (Ashley E Amick, Sarah E Feinsmith, Jordan Sell, Evan M Davis, Diane B Wayne, Joseph Feinglass, Jeffrey H Barsuk)

	<ul style="list-style-type: none"> Registered Nurses' and Medical Doctors' Experiences of Patient Safety in Health Information Exchange During Interorganizational Care Transitions: A Qualitative Review (Piia Hyvämäki, Maria Kääriäinen, Anna-Maria Tuomikoski, Minna Pikkariainen, Miia Jansson) The Analysis of Hospital Readmission Rates After the Implementation of Hospital Readmissions Reduction Program (Steve Muchiri, Nasibeh Azadeh-Fard, Fatma Pakdil) Patient Safety Strategies in Psychiatry and How They Construct the Notion of Preventable Harm: A Scoping Review (Jakob Svensson) Rates of Adverse Events in Hospitalized Patients After Summer-Time Resident Changeover in the United States: Is There a July Effect? (Mark L. Metersky, Noel Eldridge, Yun Wang, Sheila Eckenrode, Deron Galusha, Lisa Jaser, Jasie Mathew, Steven Angus, Robert Nardino)
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BMJ Leader

Volume 6, Number 1, March 2022

URL	https://bmjleader.bmj.com/content/6/1
Notes	<p>A new issue of <i>BMJ Leader</i> has been published. Articles in this issue of <i>BMJ Leader</i> include:</p> <ul style="list-style-type: none"> Editorial: Call for emergency action to limit global temperature increases, restore biodiversity and protect health (Lukoye Atwoli, Abdullah H Baqui, Thomas Benfield, Raffaella Bosurgi, Fiona Godlee, Stephen Hancocks, Richard Horton, Laurie Laybourn-Langton, Carlos Augusto Monteiro, Ian Norman, Kirsten Patrick, Nigel Praities, Marcel GM Olde Rikkert, Eric J Rubin, Peush Sahni, Richard Smith, Nicholas J Talley, Sue Turale, D Vázquez) Promoting and learning from leadership research: 10 years on (Peter Lees, Kirsten Armit) Leading effective teams (Katie Johnson) Building leadership capabilities in maternity (Ayisha Adeeba Ashmore, Kate Kanga, Tejinder Kaur-Desai, Kate Thorman, Natasha Archer) Interprofessional model on speaking up behaviour in healthcare professionals: a qualitative study (Rachel Umoren, Sara Kim, Megan M Gray, Jennifer A Best, Lynne Robins) Identifying leadership in medical trainees: evaluation of a competency-based approach (Samantha K. Jones, Ka H Chan, J S Bourdage, A Bharwani) Learning from minor injury care restructure during the COVID-19 pandemic: a phenomenological study of orthopaedic clinical leaders (Sophie Gatfield, Daniel Yeomans, Henry Walton, Will Mason, Vinay Takwale) Distributing leadership for scaling up evidence-based innovation in LMICs: a case for leadership development in India (Graeme Currie, Kamal Gulati, Dimitrios Spyridonidis, Sridhar Vaitheswaran) Distributing systems level leadership to address the COVID-19 pandemic (Graeme Currie, Kamal Gulati, Amrik Sohal, D Spyridonidis, J O Busari) Time to get serious about distributed leadership: lessons to learn for promoting leadership development for non-consultant career grade doctors in the UK (Emmeline Lagunes Cordoba, Suzanne Shale, R C Evans, D Tracy) Impact of entrepreneurship training on clinician engagement in innovation creation: an evaluation of the Johns Hopkins Hexcite programme (Adler Archer, Jasmine Mcneil, Teresa Johnson, Ewan Ferlie, Paul Nagy)

	<ul style="list-style-type: none"> • Game of snakes and ladders: barriers and enablers for aspiring women leaders in healthcare (Lucia Magee, Rose Penfold) • Conference panels: do they reflect the diversity of the NHS workforce? (Kethaki Prathivadi Bhayankaram, Nuthana Prathivadi Bhayankaram) • Community immersion project to enhance medical students understanding of the health needs of the most vulnerable in the community (Fathima Rawther, Sophie Bondje, Anisah Rahman, Adelaide Duku, Selani Gooneratne, Matthew Beck, Surajdeep Ubhi, Christina Gleeson, B Kumaravel, J Harris)
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BMJ Quality & Safety online first articles

URL	https://qualitysafety.bmj.com/content/early/recent
Notes	<p><i>BMJ Quality & Safety</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • Optimising GPs’ communication of advice to facilitate patients’ self-care and prompt follow-up when the diagnosis is uncertain: a realist review of ‘safety-netting’ in primary care (Claire Friedemann Smith, Hannah Lunn, Geoff Wong, Brian D Nicholson) • Accuracy of telephone triage for predicting adverse outcomes in suspected COVID-19: an observational cohort study (Carl Marincowitz, Tony Stone, Peter Bath, Richard Campbell, Janette Kay Turner, Madina Hasan, Richard Pilbery, Benjamin David Thomas, Laura Sutton, Fiona Bell, Katie Biggs, Frank Hopfgartner, Suvodeep Mazumdar, Jennifer Petrie, Steve Goodacre) • Experience of hospital-initiated medication changes in older people with multimorbidity: a multicentre mixed-methods study embedded in the OPTimising thERapy to prevent Avoidable hospital admissions in Multimorbid older people (OPERAM) trial (Stefanie Thevelin, Catherine Pétein, Beatrice Metry, Luise Adam, Annië van Herksen, Kevin Murphy, Wilma Knol, Denis O’Mahony, Nicolas Rodondi, Anne Spinewine, Olivia Dalleur) • Editorial: Channelling the force of audit and feedback: averting the dark side (Eilidh M Duncan, Noah M Ivers, Jeremy M Grimshaw)

International Journal for Quality in Health Care online first articles

URL	https://academic.oup.com/intqhc/advance-articles
Notes	<p><i>International Journal for Quality in Health Care</i> has published a number of ‘online first’ articles, including:</p> <ul style="list-style-type: none"> • How Safe is Virtual Healthcare? (Reema Harrison, Elizabeth Manias) • Job Burnout Facing Chinese General Practitioners in the Context of COVID-19 (Yu Xiao, Jia Chen) • Depression Screening will be Included in Chinese Students’ Health Check-Ups (Yu Xiao, Na Du)

Online resources

Clinical Communiqué

<https://www.thecommunikes.com/post/clinical-communiqu%C3%A9-volume-9-issue-1-march-2022>

Volume 9 Issue 1, March 2022

This issue of *Clinical Communiqué* examines the issue of **falls in older patients**, particularly the importance of assessing the extent of injuries after a fall. The issue includes two case summaries in

which the extent of injury was not fully appreciated until it was too late. In addition to the case summaries, are two case vignettes, that reiterate how common falls in the older person are, with important messages about primary and secondary prevention of falls in the older person. There is also an expert commentary that provides guidance and advice.

Privacy guidance regarding Individual Healthcare Identifiers (IHIs) on COVID-19 digital vaccination certificates

<https://www.oaic.gov.au/privacy/guidance-and-advice/privacy-guidance-regarding-individual-healthcare-identifiers-ihis-on-covid-19-digital-vaccination-certificates>

The Office of the Australian Information Commissioner (OAIC) has provided guidance for any entity or individual that collects a person's COVID-19 digital vaccination certificate which contains an Individual Healthcare Identifier (IHI). The key privacy tips are:

- Don't collect a COVID-19 digital certificate if it is not required - sight a copy of the certificate instead.
- If a copy of a COVID-19 digital certificate must be collected, do not collect an IHI.
- Consider removing or redacting IHIs from any COVID-19 digital certificates that have already been collected and stored in a record.
- Understand the privacy obligations that apply once you have collected an IHI.

[UK] NICE Guidelines and Quality Standards

<https://www.nice.org.uk/guidance>

The UK's National Institute for Health and Care Excellence (NICE) has published new (or updated) guidelines and quality standards. The latest reviews or updates are:

- NICE Guideline NG17 ***Type 1 diabetes in adults: diagnosis and management***
<https://www.nice.org.uk/guidance/ng17>
- NICE Guideline NG18 ***Diabetes (type 1 and type 2) in children and young people: diagnosis and management*** <https://www.nice.org.uk/guidance/ng18>
- NICE Guideline NG28 ***Type 2 diabetes in adults: management***
<https://www.nice.org.uk/guidance/ng28>
- Quality Standard QS125 ***Diabetes in children and young people***
<https://www.nice.org.uk/guidance/qs125>
- NICE Guideline NG191 ***COVID-19 rapid guideline: managing COVID-19***
<https://www.nice.org.uk/guidance/ng191>
- Quality Standard QS206 ***Joint replacement (primary): hip, knee and shoulder***
<https://www.nice.org.uk/guidance/qs206>

[UK] NIHR Evidence alerts

<https://evidence.nihr.ac.uk/alerts/>

The UK's National Institute for Health Research (NIHR) has posted new evidence alerts on its site. Evidence alerts are short, accessible summaries of health and care research which is funded or supported by NIHR. This is research which could influence practice and each Alert has a message for people commissioning, providing or receiving care. The latest alerts include:

- One-off physiotherapy session is an effective way to treat **shoulder pain**
- Older women with **breast cancer** chose less aggressive treatment when they used a decision aid
- More **automated defibrillators** are needed in deprived areas
- **Smaller hospitals** are urged to increase collaborative working to meet the needs of an ageing population
- How can we better support parents when their **newborn baby is dying?**
- Why don't children and young people engage with **diabetes services?**
- Multiple long-term conditions should not be a barrier to **hip replacement surgery**

- Are you at **risk of diabetes**? Research finds prevention should start at a different BMI for each ethnic group
- What help do people who **self-harm** need from A&E departments?
- **Children with tics** can be helped by a new online treatment
- Inequalities increase when **children have stomach bugs**
- Team work and proactive healthcare could help **people with severe mental illness** receive good end-of-life care.

COVID-19 resources

<https://www.safetyandquality.gov.au/covid-19>

The Australian Commission on Safety and Quality in Health Care has developed a number of resources to assist healthcare organisations, facilities and clinicians. These and other material on COVID-19 are available at <https://www.safetyandquality.gov.au/covid-19>

These resources include:

- ***COVID-19 infection prevention and control risk management***
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance>
- ***Poster – Combined contact and droplet precautions***
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/poster->



VISITOR RESTRICTIONS IN PLACE

For all staff

Combined contact & droplet precautions in addition to standard precautions*

Before entering room/care area

-  Perform hand hygiene
-  Put on gown
-  Put on a surgical mask
-  Put on protective eyewear
-  Perform hand hygiene
-  Put on gloves

At doorway prior to leaving room/care area

-  Remove and dispose of gloves
-  Perform hand hygiene
-  Remove and dispose of gown
-  Perform hand hygiene
-  Remove protective eyewear
-  Perform hand hygiene
-  Remove and dispose of mask
-  Leave the room/care area
-  After leaving the room/care area perform hand hygiene

*e.g. Acute respiratory tract infection with unknown aetiology (low COVID-19 risk), seasonal influenza and RSV
For more detail, refer to the *Australian Guidelines for the Prevention and Control of Infection in Healthcare*, your state and territory guidance and <https://www.health.gov.au/committees-and-groups/infection-control-expert-group-ic-eg>

- *Poster – Combined airborne and contact precautions*
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/poster-combined-airborne-and-contact-precautions>

VISITOR RESTRICTIONS IN PLACE

For all staff

Combined airborne & contact precautions

in addition to standard precautions

Before entering room/care zone

At doorway prior to leaving room/care zone

- 1

Perform hand hygiene
- 2

Put on gown
- 3

Put on a particulate respirator (e.g. P2/N95) and perform fit check
- 4

Put on protective eyewear
- 5

Perform hand hygiene
- 6

Put on gloves

- 1

Remove and dispose of gloves
- 2

Perform hand hygiene
- 3

Remove and dispose of gown
- 4

Leave the room/care zone
- 5

Perform hand hygiene (in an anteroom/outside the room/care zone)
- 6

Remove protective eyewear (in an anteroom/outside the room/care zone)
- 7

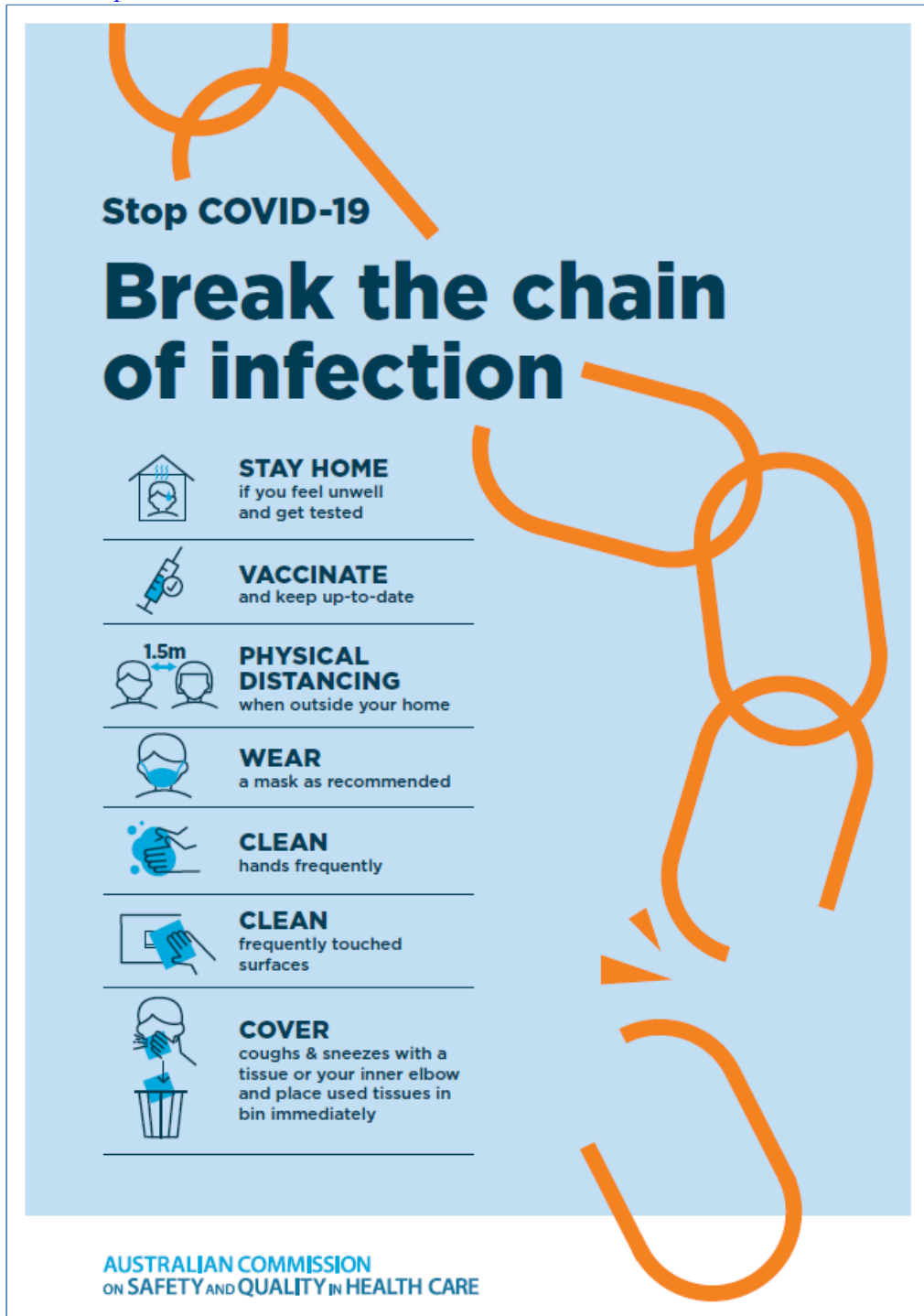
Perform hand hygiene (in an anteroom/outside the room/care zone)
- 8

Remove and dispose of particulate respirator (in an anteroom/outside the room/care zone)
- 9

Perform hand hygiene

KEEP DOOR CLOSED AT ALL TIMES

- *Environmental Cleaning and Infection Prevention and Control*
www.safetyandquality.gov.au/environmental-cleaning
- *COVID-19 infection prevention and control risk management – Guidance*
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-infection-prevention-and-control-risk-management-guidance>
- *Safe care for people with cognitive impairment during COVID-19*
<https://www.safetyandquality.gov.au/our-work/cognitive-impairment/cognitive-impairment-and-covid-19>
- *Stop COVID-19: Break the chain of infection* poster
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/break-chain-infection-poster-a3>



- *FAQs for clinicians on elective surgery* <https://www.safetyandquality.gov.au/node/5724>
- *FAQs for consumers on elective surgery* <https://www.safetyandquality.gov.au/node/5725>
- *COVID-19 and face masks – Information for consumers*
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-and-face-masks-information-consumers>

**AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE**

INFORMATION
for consumers

COVID-19 and face masks

Should I use a face mask?

Wearing face masks may protect you from droplets (small drops) when a person with COVID-19 coughs, speaks or sneezes, and you are less than 1.5 metres away from them. Wearing a mask will also help protect others if you are infected with the virus, but do not have symptoms of infection.

Wearing a face mask in Australia is recommended by health experts in areas where community transmission of COVID-19 is high, whenever physical distancing is not possible. Deciding whether to wear a face mask is your personal choice. Some people may feel more comfortable wearing a face mask in the community.

When thinking about whether wearing a face mask is right for you, consider the following:

- Face masks may protect you when it is not possible to maintain the 1.5 metre physical distance from other people e.g. on a crowded bus or train
- Are you older or do you have other medical conditions like heart disease, diabetes or respiratory illness? People in these groups may get more severe illness if they are infected with COVID-19
- Wearing a face mask will reduce the spread of droplets from your coughs and sneezes to others (however, if you have any cold or flu-like symptoms you should stay home)
- A face mask will not provide you with complete protection from COVID-19. You should also do all of the other things listed below to prevent the spread of COVID-19.

What can you do to prevent the spread of COVID-19?

Stopping the spread of COVID-19 is everyone's responsibility. The most important things that you can do to protect yourself and others are to:

- Stay at home when you are unwell, with even mild respiratory symptoms
- Regularly wash your hands with soap and water or use an alcohol-based hand rub
- Do not touch your face
- Do not touch surfaces that may be contaminated with the virus
- Stay at least 1.5 metres away from other people (physical distancing)
- Cover your mouth when you cough by coughing into your elbow, or into a tissue. Throw the tissue away immediately.

National COVID-19 Clinical Evidence Taskforce

<https://covid19evidence.net.au/>

The National COVID-19 Clinical Evidence Taskforce is a collaboration of peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19. The taskforce is undertaking continuous evidence surveillance to identify and rapidly synthesise emerging research in order to provide national, **evidence-based guidelines and clinical flowcharts for the clinical care of people with COVID-19**. The guidelines address questions that are specific to managing COVID-19 and cover the full disease course across mild, moderate, severe and critical illness. These are ‘living’ guidelines, updated with new research in near real-time in order to give reliable, up-to-the minute advice to clinicians providing frontline care in this unprecedented global health crisis.

COVID-19 Critical Intelligence Unit

<https://www.aci.health.nsw.gov.au/covid-19/critical-intelligence-unit>

The Agency for Clinical Innovation (ACI) in New South Wales has developed this page summarising rapid, evidence-based advice during the COVID-19 pandemic. Its operations focus on systems intelligence, clinical intelligence and evidence integration. The content includes a daily evidence digest, a COVID status monitor, a risk monitoring dashboard and evidence checks on a discrete topic or question relating to the current COVID-19 pandemic. There is also a ‘Living evidence’ section summarising key studies and emerging evidence on **COVID-19 vaccines** and **SARS-CoV-2 variants**. The most recent updates include:

- ***Budesonide and aspirin for pregnant women with COVID-19*** – What is the evidence for the use of Budesonide for pregnant women with COVID-19? What is the evidence for aspirin prophylaxis for pre-eclampsia in pregnant women with a COVID-19 infection?
- ***Omicron (BA.2 sub-lineage)*** – What is the available evidence for the BA.2 sub-lineage of the Omicron variant of concern?
- ***COVID-19 vaccines in Australia*** – What is the evidence on COVID-19 vaccines in Australia?
- ***COVID-19 pandemic and wellbeing of critical care and other healthcare workers*** – Evidence in brief on the impact of the COVID-19 pandemic on the wellbeing of critical care and other healthcare workers.
- ***Surgery post COVID-19*** – What is the evidence for the timing of surgery, and outcomes following surgery, for people who have recovered from COVID-19?
- ***Disease modifying treatments for COVID-19 in children*** – What is the evidence for disease modifying treatments for COVID-19 in children?
- ***Mask type for COVID-19 positive wearer*** – What is the evidence for different mask types for COVID-19 positive wearers?
- ***Post acute and subacute COVID-19 care*** – What published advice and models of care are available regarding post-acute and subacute care for COVID-19 patients?
- ***Hospital visitor policies*** – What is the evidence for hospital visitor policies during and outside of the COVID-19 pandemic?
- ***Surgical masks, eye protection and PPE guidance*** – What is the evidence for surgical masks in the endemic phase in hospitals and for eyewear to protect against COVID-19?

Disclaimer

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